

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000012518

Entity Name: BETTER LIFE LINES LLC

FILED  
Apr 27, 2009  
Secretary of State

**Current Principal Place of Business:**

16484 SW 61 WAY  
MIAMI, FL 33193

**New Principal Place of Business:**

**Current Mailing Address:**

16484 SW 61 WAY  
MIAMI, FL 33193

**New Mailing Address:**

FEI Number: 83-0507397

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

FOWLER, MYRIAM  
16484 SW 61 WAY  
MIAMI, FL 33193 US

**Name and Address of New Registered Agent:**

FOWLER, MYRIAM MANAGER  
16484 SW 61 WAY  
MIAMI, FL 33193 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MYRIAM FOWLER

04/27/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: FOWLER, RICHARD  
Address: 16484 SW 61 WAY  
City-St-Zip: MIAMI, FL 33193

Title: MGRM ( ) Delete  
Name: FOWLER, MYRIAM  
Address: 16484 SW 61 WAY  
City-St-Zip: MIAMI, FL 33193

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MYRIAM FOWLER

MGR

04/27/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date